

December 22, 2011

Los Angeles County **Board of Supervisors**

Gloria Molina

First District

Each Supervisor

Mark Ridley-Thomas

Second District

Mitchell H. Katz, M.D. /

Director

Zev Yaroslavsky Third District

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SUBJECT:

TO:

FROM:

STATUS REPORT ON KEY INDICATORS OF PROGRESS.

HOSPITAL OPERATIONS, AND OTHER ISSUES RELATED TO THE TRANSITION TO THE NEW LAC+USC MEDICAL CENTER - PROGRESS REPORT #70 (Agenda Item #_

January 10, 2012)

Michael D. Antonovich Fifth District

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To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.

This is to provide your Board with the bi-monthly report on the status of transitioning to the new LAC+USC Medical Center (LAC+USC). This report is the full monthly operational report with trends to include the month of December 2011.

Census Trending (ADC includes Psychiatric & Newborn Patients)

The Average Daily Census (ADC) for the month of September was 587 out of 676 licensed beds, an estimated 85% utilization rate (87% occupancy). The census for Medical/Surgical units was 301, an estimated 95% utilization rate (97% occupancy) for November 2011.

Emergency Department (ED) Indicators

Attachment #1 demonstrates a slight decrease in key indicators such as ED Wait Time and Left Without Being Seen (LWBS). Median ED Boarding indicators remained relatively stable during this period. The number of patients transferred out this period is 8% less than in October 2011.

Length of Stay (ALOS) and Dangerously Overcrowding Level indicators increased slightly during this period. The Dangerously Overcrowding Level Comparison for this period was 7.5% compared to 5.1% in October 2011; offset by a decrease in the severely overcrowded.

If you have any questions or need additional information please contact me or Pete Delgado, LAC+USC Chief Executive Officer at (323) 409-2800.

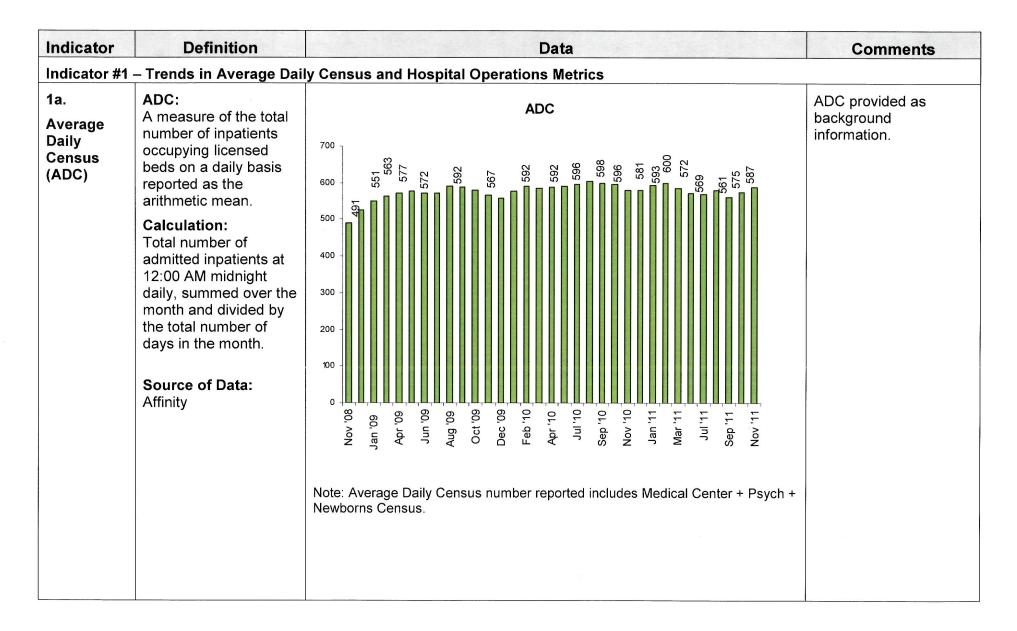
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Attachments

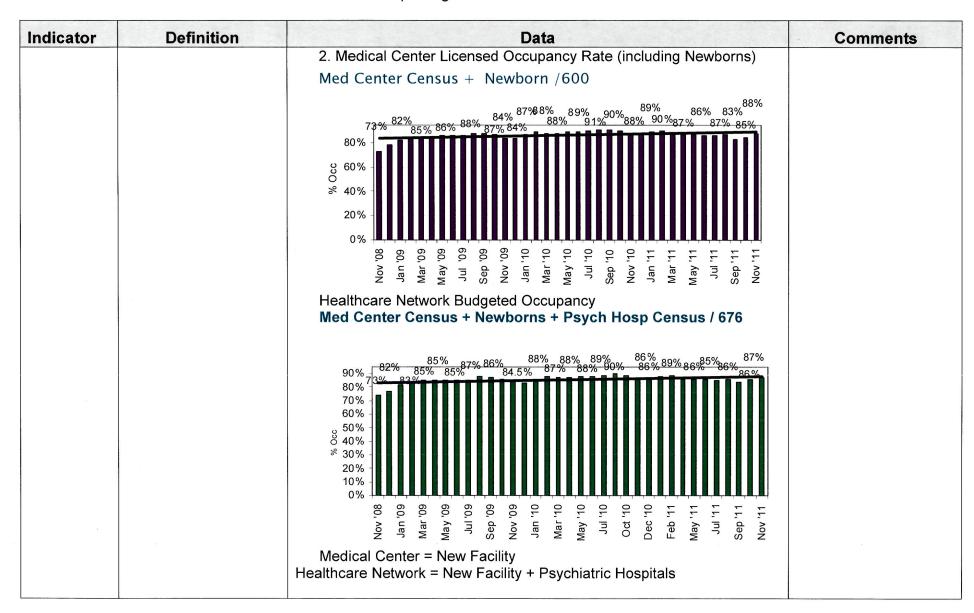
Chief Executive Office C: County Counsel Executive Office, Board of Supervisor

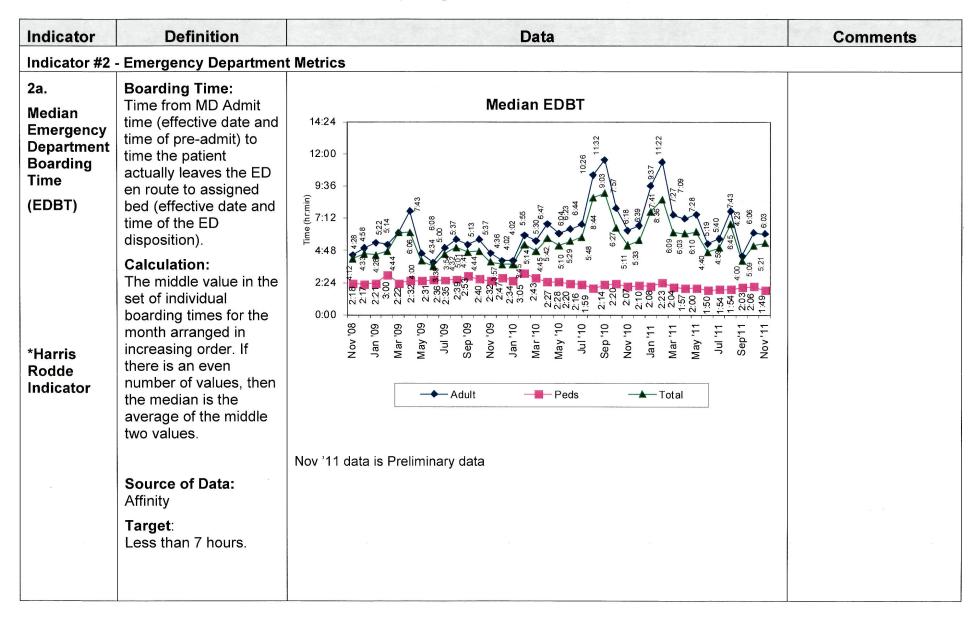


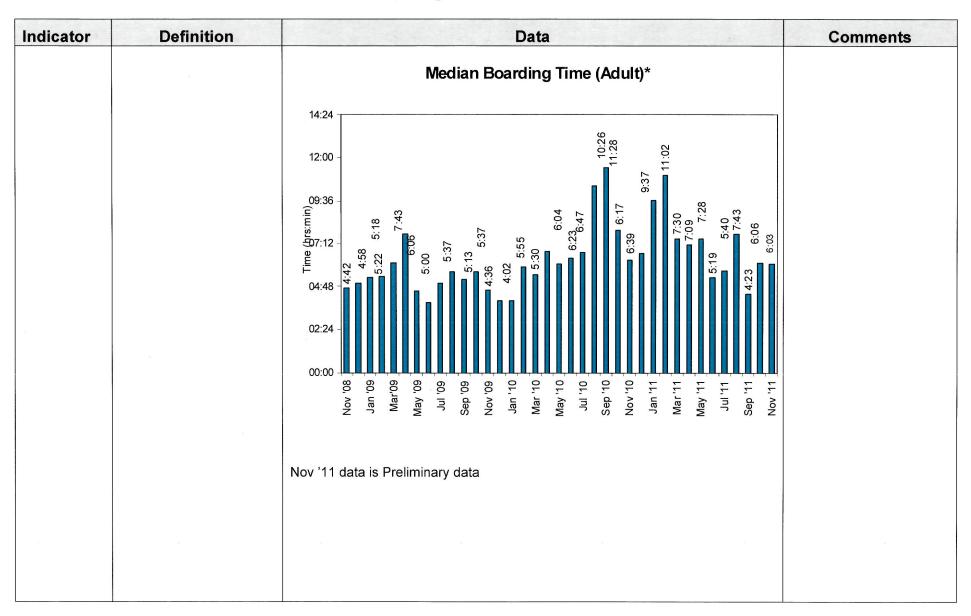
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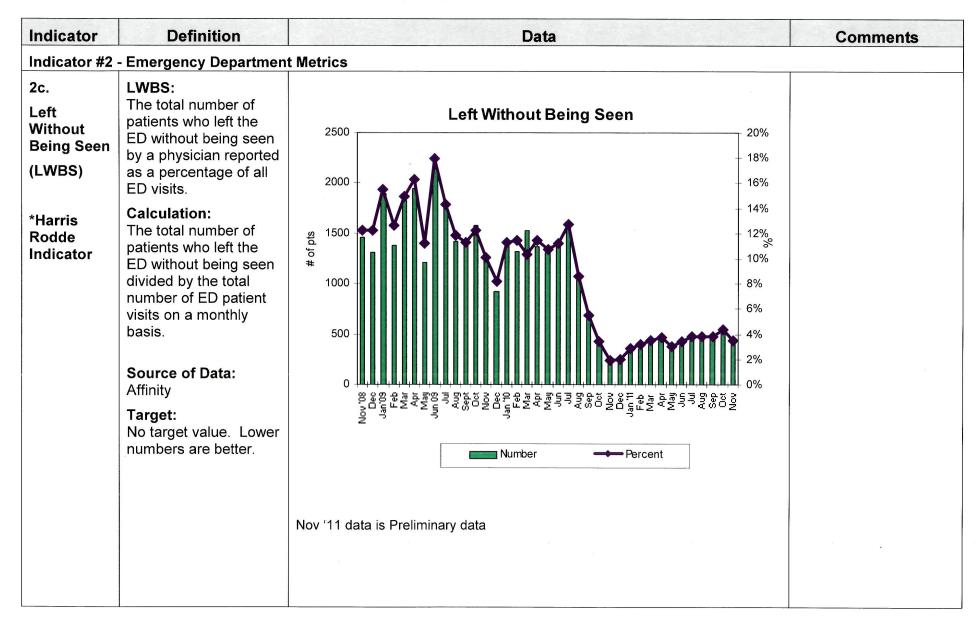
Indicator	Definition	Data	Comments
Indicator #1	– Trends in Average Dail	y Census and Hospital Operations Metrics	
1b. Occupancy Rate LAC+USC Medical Center	Definition: A measure of the usage of the licensed beds during the reporting period that is derived by dividing the patient days in the reporting period by the licensed bed days in the reporting period.	1. Medical Center Licensed Occupancy Rate (excluding Newborns) = Med Center Census – Newborns / 600 83%85% 88% 83% 88% 89%90% 89% 85% 86% 86% 86% 86% 86% 86% 86% 86% 86% 86	For comparison, occupancy rates reported in the old facility were reported including newborns and were based on budgeted beds.
	Calculation: The total number of admitted inpatients at 12:00 AM midnight, including women in labor, may include normal newborns and psychiatric inpatients divided by licensed or budgeted beds.	Nov '08 May '10 Nov '10 Sep '09 Nov '10 Nov '10 Nay '11 May '11 May '11 Nay	
	Source of Data: Affinity		
	Target: 95%		
9			



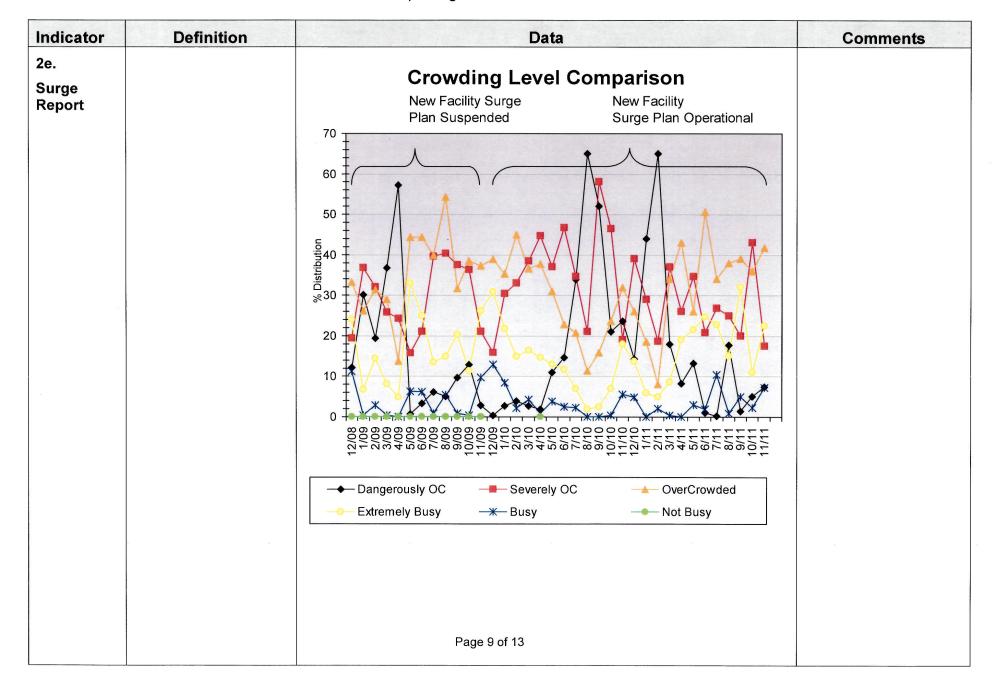




Indicator	Definition	Data	Comments				
Indicator #2	- Emergency Department Metrics						
2b. ED Wait Time	ED Wait Time: Measured from time patient is triaged to time patient is either admitted or discharged reported as an arithmetic mean. Definition: Sum of all wait time values during the monthly reporting period divided by the total number of values. Source of Data: Affinity Target: No target value. Lower numbers are better.	Average ED Wait Time 14:24 12:00 14:24 12:00 14:24 12:00 14:24 12:00 15:00 1					

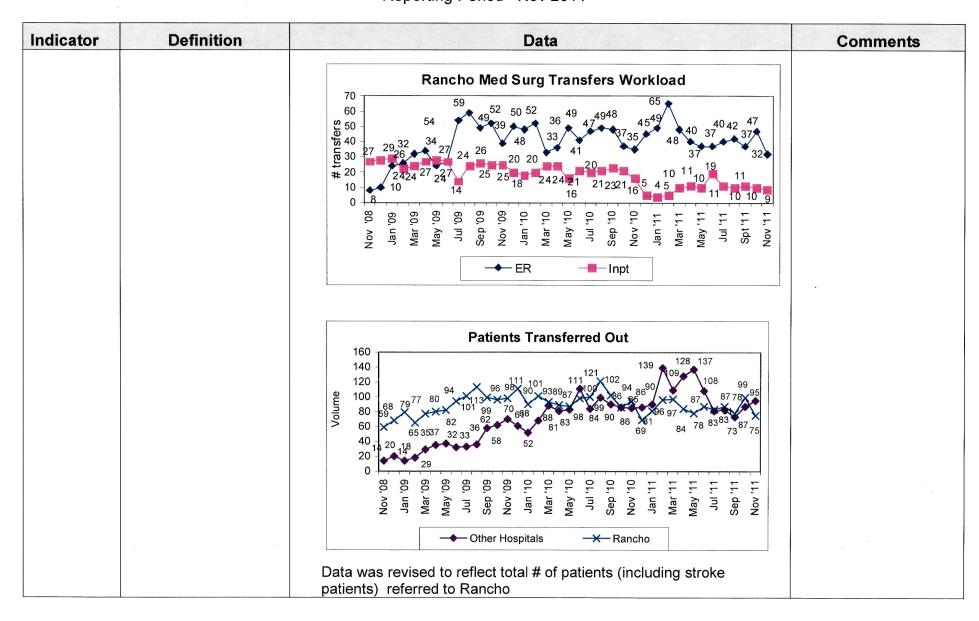


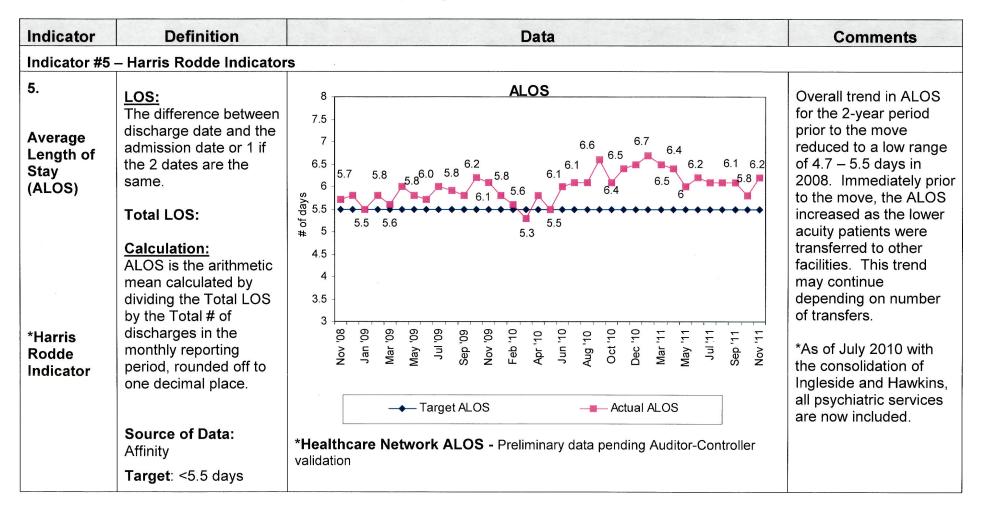
Indicator	Definition	Data	Comments
Indicator #2	- Emergency Departmen	t Metrics	
2d. ED Diversion	ED Diversion: A percentage measure of the time the ED diverts ambulance traffic away from the ED, reported as a function of the reason for diversion on a monthly basis. Calculation: The total number of hours of ED diversion for a specific reason divided by the total number of available hours in a month. Source of Data: ReddiNet	Diversion of ALS Units due to ED Saturation 81 77 79 69 60 58 63 51 59 60 59 59 59 59 59 50 10 10 10 10 10 10 10 10 10	This is slightly lower than the before move diversion history which generally ranged between 50-60%. Key points: Diversion is for paramedic runs only; Basic Life Support ambulances still arrive When diversion is requested but all hospitals in the area are on diversion, patients go to the closest hospital. Therefore, ambulances often arrive while "on diversion".



	rsions and Transfers & #4 Month of Nov '11 Referrals from ER: # Met transfer criteria	Med/Surg	Acute Stroke	Amigos Metrics Total		
The volume of patients transferred to RLAH for acute hospitalization from the Emergency Department and from	Referrals from ER:		Acute Stroke	Total		
acute hospitalization from the Emergency Department and from	# Met transfer criteria		Acute Stroke	Total		
Department and from	# Met transfer criteria	22				
npatient Units.		33	NA	-		
	# Referred to RLAH	33	33	66		
D 4 0	# Transfers	32	33	65		
Manual record keeping.	# Denied	11	NA	-		
	# Cancelled	0*	NA	-		
Cancelled category includes patients whose condition changed leading to higher level of care or discharge home.	# Patients refused*	0	NA	-		
	Referrals from Inpatients	<u>:</u>				
		Med/Surg	Acute Stroke	Total		
	# Met transfer criteria	17	NA			
	# Referred to RLAH	14	1	15		
	# Transfers	9	1	10		
	# Denied	5	NA	_		
	# Cancelled	1*	NA	-		
2	# Patients refused*	0	NA	-		
	Other /Pending	2	NA	-		
	Cancelled category ncludes patients whose condition hanged leading to igher level of care or	# Denied # Cancelled category Includes patients refused* # Patients refused* # Met transfer criteria Includes	# Denied 1 # Cancelled category necludes patients whose condition hanged leading to igher level of care or lischarge home. # Met transfer criteria 17 # Referred to RLAH 14 # Transfers 9 # Denied 1 # Cancelled 0* # Patients refused* 0 Referrals from Inpatients: # Met transfer criteria 17 # Referred to RLAH 14 # Transfers 9 # Denied 5 # Cancelled 1* # Patients refused* 0	# Denied 1 NA # Cancelled category ncludes patients whose condition hanged leading to igher level of care or ischarge home. # Met transfer criteria 17 NA # Referred to RLAH 14 1 # Transfers 9 1 # Denied 5 NA # Cancelled 1 NA # Referred to RLAH 1* NA # Denied 5 NA # Cancelled 1 NA # Cancelled 0* NA # Met transfer criteria 17 NA # Referred to RLAH 14 1 # Transfers 9 1 # Denied 5 NA # Cancelled 1* NA	# Denied 1 NA - # Cancelled category includes patients whose condition hanged leading to digher level of care or ischarge home. # Met transfer criteria 17 NA - # Referred to RLAH 14 1 15 # Transfers 9 1 10 # Denied 5 NA - # Cancelled 1 NA - # Cancelled 0* NA - # Cancelled 5 NA - # Cancelled 1* NA - # Patients refused* 0 NA - # Patients refused* 0 NA - # Referred to RLAH 14 1 15 # Transfers 9 1 10 # Denied 5 NA - # Cancelled 1* NA - # Patients refused* 0 NA -	

LAC+USC Medical Center Operational Monitoring Report Reporting Period –Nov 2011





Indicator	Definition			Data			Comments
Indicator #6 – P	Pediatric Metrics						
6. Pediatric Bed	Census: The total number	Date	NICU (40 Beds)	Peds Ward (25 Beds)	PICU (10 Beds)	Med/Surg Adolescent (20 Beds)	
	admitted pediatric	Nov-08	56%	54%	50%	33%	
Census and	inpatients at 12:00 AM	Dec-08	52%	60%	60%	40%	
Occupancy	midnight of a	Jan-09	52%	68%	70%	75%	
(%)	designated pediatric	Feb-09	50%	80%	80%	85%	
	ward.	Jun-09	60%	64%	60%	75%	
	ward.	Jul-09	57%	72%	60%	80%	
Pediatric ICU	Occupancy:	Sep-09	55%	68%	70%	80%	
(PICU)	The total number of	Oct-09	45%	60%	60%	80%	
,	admitted pediatric	Nov-09	35%	64%	70%	70%	
Neonatal ICU	inpatients divided by	Dec-09	40%	64%	70%	65%	
(NICU)		Mar -10	65%	68%	60%	75%	
Dadiatria IIrrit	the total number of	Apr-10	60%	64%	60%	80%	
Pediatric Unit	licensed beds on that unit and reported as percentage. Source of Data: Affinity	May -10	67.5%	68%	80%	80%	
Adolescent		Jun -10	65%	64%	70%	80%	
Unit		Jul -10	60%	68%	80%	85%	
Onit		Aug -10	62%	68%	60%	85%	
		Sep -10	72.5%	60%	60%	80%	
		Nov-10	67.5%	48%	50%	70%	
		Dec -10	62%	60%	50%	65%	
	7 (111111)	Jan -11	55%	60%	70%	70%	
		Feb -11	57%	68%	80%	80%	
		Mar- 11	57%	60%	70%	75%	
		Apr-11	55%	64%	50%	75%	
		May -11	57%	56%	50%	80%	
		Jun-11	70%	52%	60%	75%	
		Jul -11	58%	44%	50%	70%	
		Aug- 11	58%	44%	40%	75%	
		Sep -11	58%	40%	50%	75%	
		Oct-11	55%	52%	60%	70%	
		Nov-11	62%	60%	70%	75%	